

In re:

Case No.

Hillyer, William & Susan
Debtor(s)

**STATEMENT UNDER PENALTY OF PERJURY RE:
PAYMENT ADVICES DUE PURSUANT TO 11 U.S.C. SEC. 521(a)(1)(B)(iv)**

- ☒ **Debtor 1** has attached to this statement copies of all payment advices or other evidences of payment received within 60 days before the date of the filing of the petition from any employer.
- ☐ **Debtor 1** has not filed copies of payment advices or other evidence of payment received within 60 days before the date of the filing of the petition from any employer because:
- ☐ Debtor 1 was not employed during the 60 days preceding the filing of the petition.
- ☐ Debtor 1 was employed for only a portion of the 60 days preceding the filing of the petition. Please specify period during which debtor was unemployed.
- ☐ Debtor 1 was self-employed during the 60 days preceding the filing of the petition.
- ☐ Debtor 1 received only unemployment, veteran's benefits, social security, disability or other retirement income during the 60 days preceding the filing of the petition;
- ☐ Other (please explain):

I declare under penalty of perjury that I have read this Statement, and it is true to the best of my knowledge, information and belief.

Signature of Debtor 1: William J. Hillyer Date: 2-27-2018

- ☐ **Debtor 2** has attached to this statement copies of all payment advices or other evidences of payment received within 60 days before the date of the filing of the petition from any employer.
- ☐ **Debtor 2** has not filed copies of payment advices or other evidence of payment received within 60 days before the date of the filing of the petition from any employer because:
- ☒ Debtor 2 was not employed during the 60 days preceding the filing of the petition.
- ☐ Debtor 2 was employed for only a portion of the 60 days preceding the filing of the petition. Please specify period during which debtor was unemployed.
- ☐ Debtor 2 was self-employed during the 60 days preceding the filing of the petition.
- ☐ Debtor 2 received only unemployment, veteran's benefits, social security, disability or other retirement income during the 60 days preceding the filing of the petition.
- ☐ Other (please explain):

I declare under penalty of perjury that I have read this Statement, and it is true to the best of my knowledge, information and belief.

Signature of Debtor 2: Susan D. Hillyer Date: 2-27-2018

***** IMPORTANT NOTE:** Please make sure ALL SOCIAL SECURITY numbers, routing numbers and account numbers are redacted before filing. If the income records include the year to date amounts, you are only required to submit the first and last pay stubs from the previous 60 days.

2018 Payroll checks for

Pastor William Hillyer

(rate for 2018 is \$2,500.00 paid semi monthly) (\$2,500 X 24 = \$60,000)

Deposit Date	Payroll Period	Ck #	Gross Pay	Fed Tax W / H	Withholding Med Insurance	Soc Sec W / H	% of Gross	Medicare W / H	% of Gross	Net Check
1/13/2017	1/1 - 1/15	D D	2,500.00		\$ 193.50					2,306.50
1/30/2017	1/16 - 1/31	I E	2,500.00		\$ 193.50					2,306.50
2/14/2017	2/1 - 2/15	R P								-
2/27/2017	2/16 - 2/29	E O								-
3/5/2017	3/1 - 3/15	C S								-
3/30/2017	3/16 - 3/31	T I								-
1st quarter totals			5,000.00		\$ 387.00					4,613.00
4/13/2017	4/1 - 4/15	D D								-
4/28/2017	4/16 - 4/30	I E								-
5/12/2017	5/1 - 5/15	R P								-
5/31/2017	5/16 - 5/31	E O								-
6/14/2017	6/1 - 6/15	C S								-
6/29/2017	6/16 - 6/30	T I								-
2nd quarter totals			-		\$ -					-
7/14/2017	7/10 - 7/15									-
7/28/2017	7/16 - 7/31	DIRECT								-
8/14/2017	8/1 - 8/15	DEPOSIT								-
8/31/2017	8/16 - 8/31	" " "								-
9/14/2017	9/1 - 9/15	" " "								-
9/29/2017	9/16 - 9/30	" " "								-
3rd quarter totals			-		\$ -					-
10/12/2017	10/1 - 10/15	D D								-
10/31/2017	10/16 - 10/31	I E								-
11/15/2017	11/1 - 11/15	R P								-
11/30/2017	11/16 - 11/30	E O								-
12/15/2017	12/1 - 12/15	C S								-
	12/16 - 12/31	T I								-
4th quarter totals			-		\$ -					-
Year to date totals			5,000.00							4,613.00

2017 Payroll checks for

Pastor William Hillyer

(rate for 2017 is \$2,500.00 paid semi monthly) (\$2,500 X 24 = \$60,000)

Deposit Date	Payroll Period	Ck #	Gross Pay	Fed Tax W / H	State Tax W / H	Soc Sec W / H	% of Gross	Medicare W / H	% of Gross	Net Check
1/13/2017	1/1 - 1/15	D D								-
1/30/2017	1/16 - 1/31	I E								-
2/14/2017	2/1 - 2/15	R P								-
2/27/2017	2/16 - 2/29	E O								-
3/5/2017	3/1 - 3/15	C S								-
3/30/2017	3/16 - 3/31	T I								-
1st quarter totals			T -		0					-
4/13/2017	4/1 - 4/15	D D								-
4/28/2017	4/16 - 4/30	I E								-
5/12/2017	5/1 - 5/15	R P								-
5/31/2017	5/16 - 5/31	E O								-
6/14/2017	6/1 - 6/15	C S								-
6/29/2017	6/16 - 6/30	T I								-
2nd quarter totals			T -		0					-
Withholding										
Med Insurance										
7/14/2017	7/10 - 7/15	4282	1,250.00							1,250.00
7/28/2017	7/16 - 7/31	DIRECT	2,500.00							2,500.00
8/14/2017	8/1 - 8/15	DEPOSIT	2,500.00							2,500.00
8/31/2017	8/16 - 8/31	" " "	2,500.00		\$193.50					2,306.50
9/14/2017	9/1 - 9/15	" " "	2,500.00		\$193.50					2,306.50
9/29/2017	9/16 - 9/30	" " "	2,500.00		\$193.50					2,306.50
3rd quarter totals			13,750.00		\$580.50					13,169.50
10/12/2017	10/1 - 10/15	D D	2,500.00		\$193.50					2,306.50
10/31/2017	10/16 - 10/31	I E	2,500.00		\$193.50					2,306.50
11/15/2017	11/1 - 11/15	R P	2,500.00		\$193.50					2,306.50
11/30/2017	11/16 - 11/30	E O	2,500.00		\$193.50					2,306.50
12/15/2017	12/1 - 12/15	C S	2,500.00		\$193.50					2,306.50
12/28/2017	12/16 - 12/31	T I	2,500.00		\$193.50					2,306.50
4th quarter totals			T 15,000.00		\$1,161.00					13,839.00
Year to date totals			28,750.00							27,008.50